

# Lessons Learned from local initiatives supporting sustainable CRVS systems in Africa: Assessment studies in various countries

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# Road Map Ahead: Global CRVS Targets

	2020	2025	2030
<b>Births in given year are registered</b>	80%	90%	100%
<b>Children whose births are registered have been issued certificates</b>	70%	85%	90%
<b>Deaths in given year reported, registered, and certified with key characteristics</b>	60%	70%	80%
<b>Maternal and newborn deaths reported, registered, and investigated</b>	80%	90%	100%
<b>Deaths in children under 5 reported, disaggregated by age and sex</b>	60%	70%	80%
<b>Cause of deaths in hospitals reliably determined and officially certified</b>	80%	90%	100%
<b>Countries have community assessments of probable cause of death determined by verbal autopsies using international standards</b>	50%	65%	80%

# Where are we now?

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## Vital Event Registration Completeness, 2015

Country	Births	Deaths	Source	Note
Botswana	72%	35%	Lepang, 2015	
Swaziland	28%	26%	UNSD, 2014	
Zambia	10%	10%	UNSD, 2014	
Ethiopia	7%		DHS, 2005	
Namibia	75%	70%	UNSD, 2014	
South Africa	95%	75-89%	UNSD, 2014	

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# Historical Barriers to CRVS System Improvement in Africa

- Lack of political commitment at senior levels
- Insufficient and ad-hoc efforts to create demand and improve service delivery
- Insufficient understanding of multi-disciplinary and multi-sectoral nature of civil registration
- Limited understanding of inter-linkages of civil registration functions with service providers and individual beneficiaries
- Outdated legal frameworks based on colonial laws – inconsistent with local cultural norms and religious practices
- Insufficient technical capacity – provinces and HQ
- Outdated and/or ad-hoc ICT Systems
- Weak linkages and feedback loops between CR processes and VS production

# Common themes from the Session Papers (1)

- A balanced approach between supply-side and demand-side factors of CRVS system
  - Supply side
    - national political and administrative leadership is critical,
    - Updated and Contextualized Legal Frameworks are a necessary but not sufficient condition for CRVS Scale up
    - Comprehensive assessments & National investment plans = basic foundation
    - Importance of collaborative partnership between national/int'l orgs,
    - expansion of access to registration process (via health facilities & mobile registration) are challenging and highly context-specific,
  - Demand Side
    - Public outreach/awareness campaigns
    - Strengthened linkage b/w CRVS system and National ID systems

# Botswana: Neo Lelang

- Three particularly impressive parts to this paper:
  1. Partnership Model to advance sustainable CRVS scale-up and integrate it with National ID System
  2. National Outreach Campaign
  3. Two-pronged CR-access expansion strategy:
    - a. Facility-based expansion
    - b. Vulnerable populations
- Areas more detail/clarifications would be useful
  - How were “vulnerable populations” explicitly defined?
  - What performance metrics and benchmarks are being used part of the Botswana CRVS Investment Plan?
  - What baseline data were collected to underpin future CRVS performance assessments? Strengths/limitations of the baseline data? How were BR/Dr completeness measured (data sources? Estimation methods?)
  - Stakeholder engagement with village health committees and NGOs as part of universal registration campaign – lessons learned from such partnerships? Scope to continue and expand such partnerships, as CRVS scale-up plans evolve?
  - How has the Government of Botswana managed the challenging trade-offs between privacy/confidentiality and linked registration systems that arise when linking CRVS systems to ID management systems?

# Namibia: van Staaden & Forsingdal

- Substantial political leadership and support for CRVS reforms
- Contextualized review, reform and consultation around reform of legal CRVS framework
- Looking back:
  - Massive digitization project of 4 million CR records – a historical platform for future CR quality control and VS reporting
- Reaching forward:
  - Iterative expansion of access to registration
    - Via health facility-based registration (training of health workers)
    - Via expansion of registration offices
- Impressive short-term results: Birth registration (before 1<sup>st</sup> birthday) increase from 31% in 2008 to 59% in 2011
- Well researched and designed data architecture for National Population Registration System:
  - Scope here for a detailed technical “implementation science” elaboration that extends current descriptive reporting into more of a case-study analysis
    - how was the consultation done? How were technical specifications decided?
    - How were difficult budget/planning decisions navigated?
    - Localization/customization issues?

# Swaziland and Zambia: Jeremiah Banda

- Unsupportive legal framework for CRVS
- Staffing and resource constraints in core CR processes and in terms of VS production
- Outdated ICT Systems
- Special registration initiatives for refugee populations
  - How do these work?
  - Arrangements between government, UNHCR, etc.?
  - Data usage and VS publication practices?
  - Potential for special registration initiatives to be integrated into broader Vital Statistics System of host country

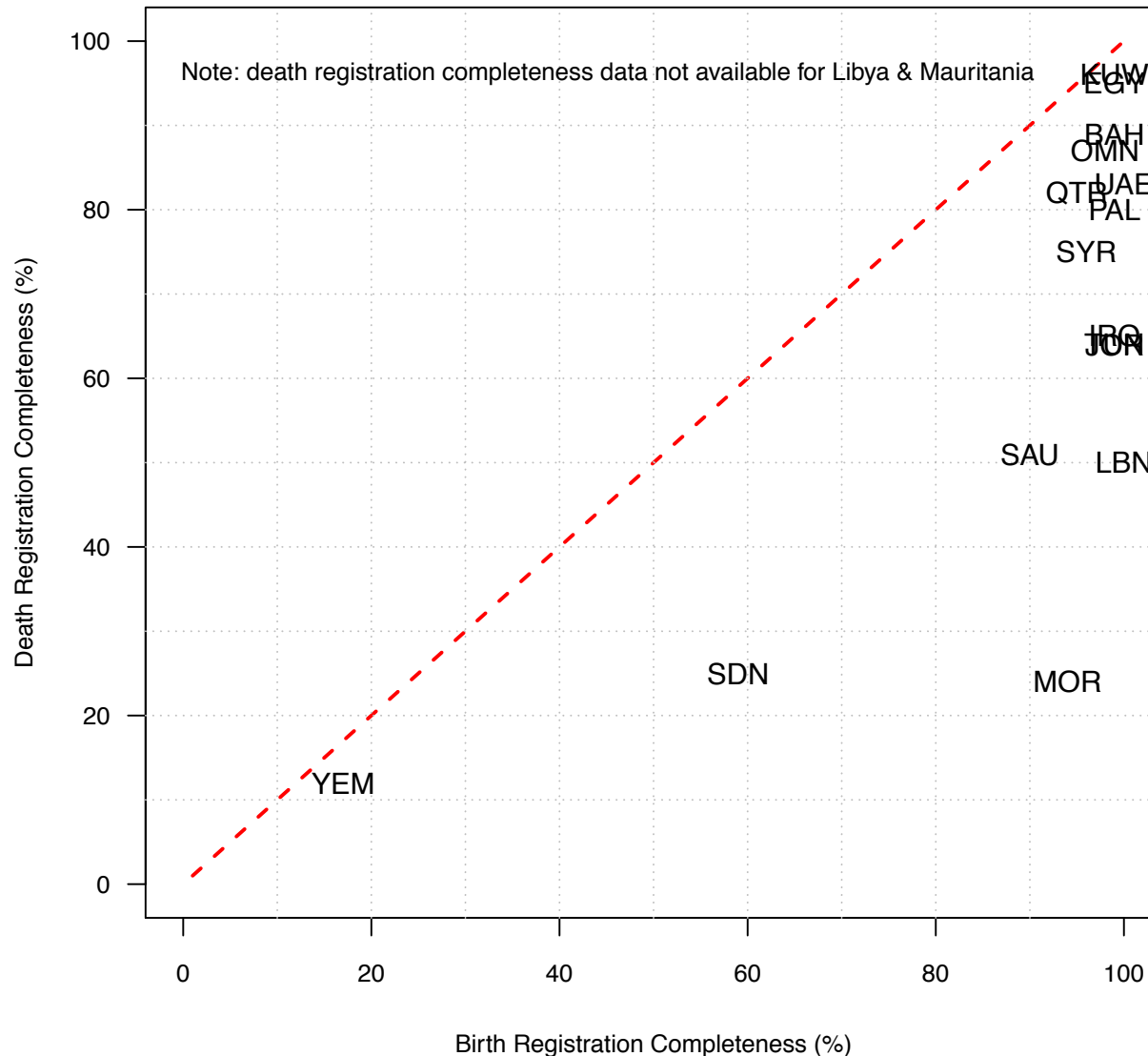
# Ethiopia: Amanuel Disassa

- Assessment based on survey of kebeles
  - More details on design and implementation of survey needed
    - questionnaire
    - Response rates, etc.?
- Expansion of analysis of CR coverage and completeness
  - BR and DR validation against FBH?
  - Combine kebele survey data from census to disaggregate CR completeness/quality by SES
    - Spatial distribution of CR completeness & SES
  - Description of data transfer practices and coordination procedures between from kebeles and Addis Ababa
- Important incentive issue surrounding completeness of death registration and burial permissions: ~70% of kebeles require death certificate for burial permit issuance.
  - Potential to develop field-based experiment to compare efficacy of tight connection between death registration and burial permit issuance

# South Africa: Aaron Ramodumo

- Integrated suite of diverse programs/strategies have been instrumental in SA's recent impressive CR improvements
- Notes a number of important lessons learned:
  - Criticality of local context → customized scale-up strategy
  - Stakeholder/partner coordination
  - Importance of long-term and sustainable financing
- Recognition of the classically “passive” nature of vital events registration
  - Basic obligation largely on the individual to register Vital Events
  - In contrast to state responsibility to register
  - How to effectively integrate special components, such as mobile registration clinics within CRVS, as the CRVS system itself is evolving?
- Paper focuses on birth registration, but how neatly do/don't the lessons learned in this paper translate to initiatives to improve death registration completeness/quality in South Africa?

# Death Registration systematically lower than birth registration (Example from Western Asia)



# Questions/Themes from the papers that call for further elaboration

- The complexities of incentives at institutional and individual levels
- Linkage between CRVS Systems & National ID Systems
- Sustained Improvement of Vital Statistics Production
- Challenges of synergy b/w CR processes & VS production
- Sustainability of continued CRVS Scale-up & Improvement
- Strategies for improvement CoD information – particularly in countries where a large proportion of deaths occur outside of facilities

# Complexities of VR incentives at the individual and institutional levels

- Births:

- broad national awareness campaigns (customization to cultural context)
- targeted outreach to vulnerable subpopulations (sensitivities/targeting/integration)
- Scale-up of VR by health facility staff (integration/prioritization/multi-tasking)

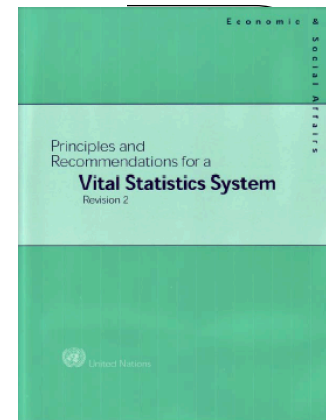
- Deaths:

- Public awareness
- Burial/cremation monitoring/supervision
- Institutional synergies between line ministries and local authorities

# Linkage between CRVS System Scale-Up & National ID System Development

- Building on lessons learned and caveats from Botswana
  - How to engineer synergy between core CRVS institutional goals (health, VS, etc.) and National ID system goals (internal security, revenue management)?
  - How do you incentivize collaboration between government ministries and avoid silofication?
  - In terms of CRVS-ID synergy, what are the potential opportunities and challenges in terms of:
    - Legal frameworks
    - Intra-governmental partnerships (across line ministries, between central and provincial/local levels of administration)
    - ICT integration
    - Privacy/Confidentiality Issues vis-à-vis data sharing/data management

# VS Reporting Standards: UN Principles & Recommendations



Collection of tables in 10 sections:

1. VS  
summary  
by urban/  
rural  
residence  
for the last  
5 years

2. Live births

3. Fertility  
rates

4. Life  
Tables

5. Deaths

6. Infant  
deaths  
(deaths  
under 1 year  
of age)

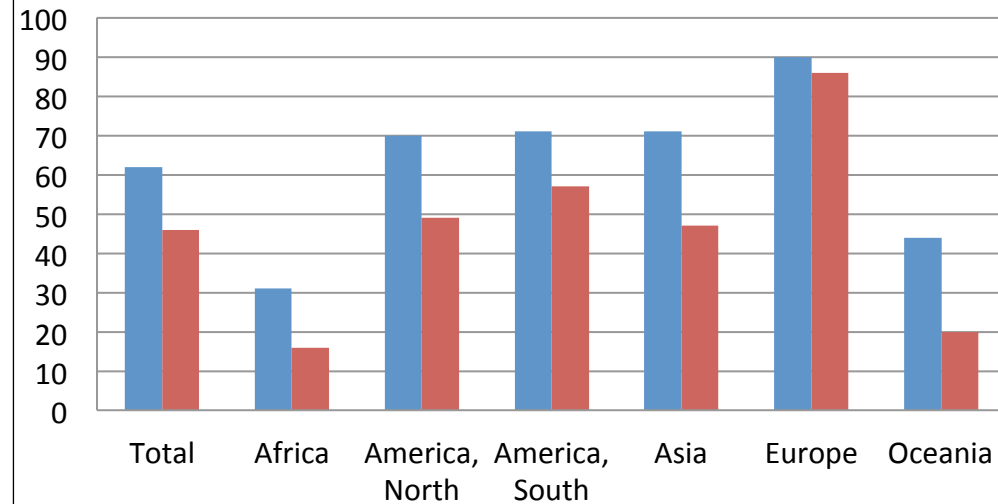
7. Foetal deaths  
and Late foetal  
deaths

8. Legally  
induced  
abortions

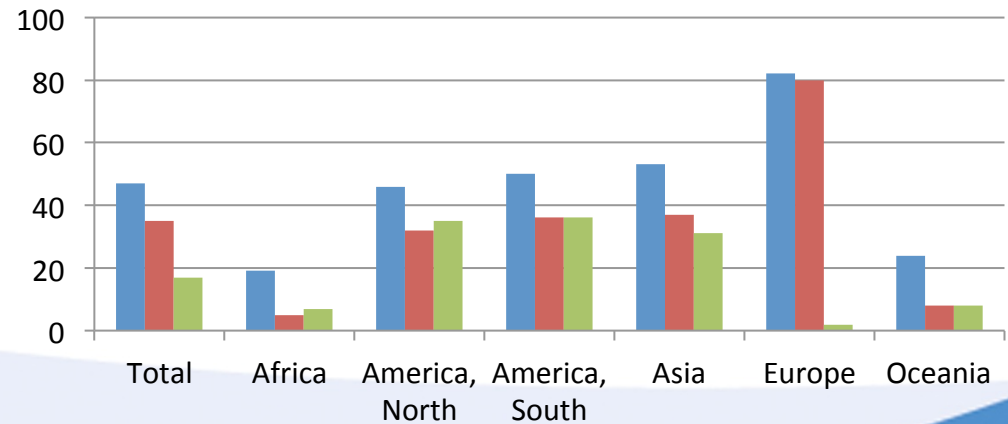
9. Marriages

10. Divorces

# Percentage of countries that sent data to UNSD in the last five years

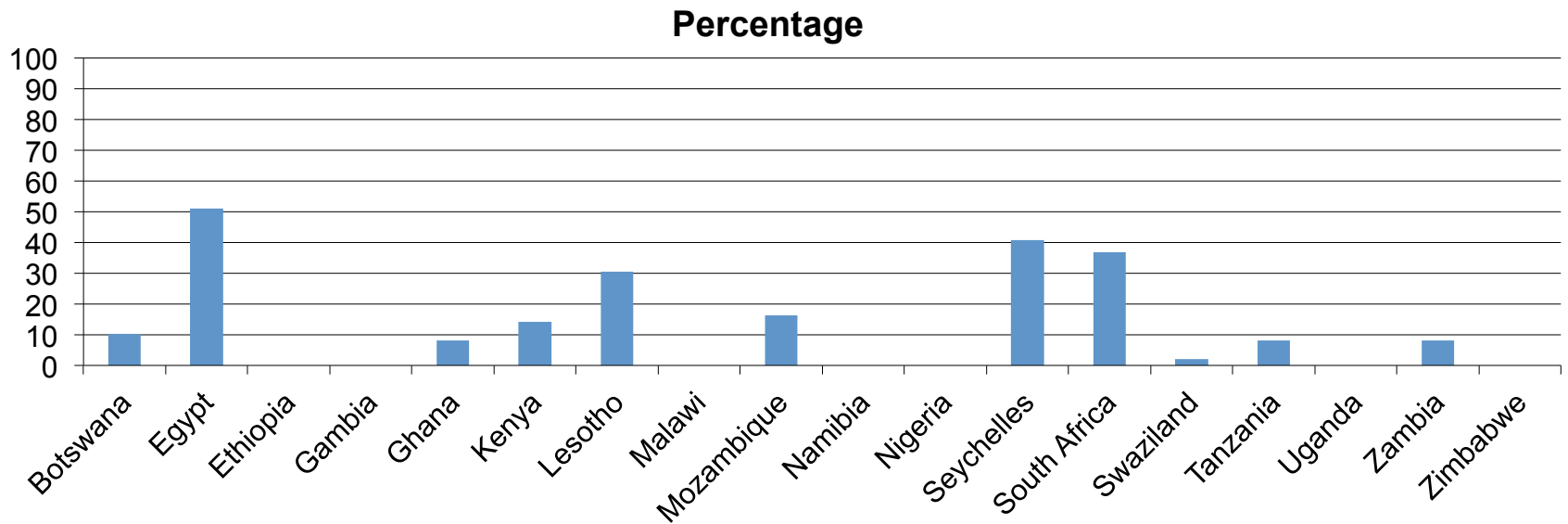
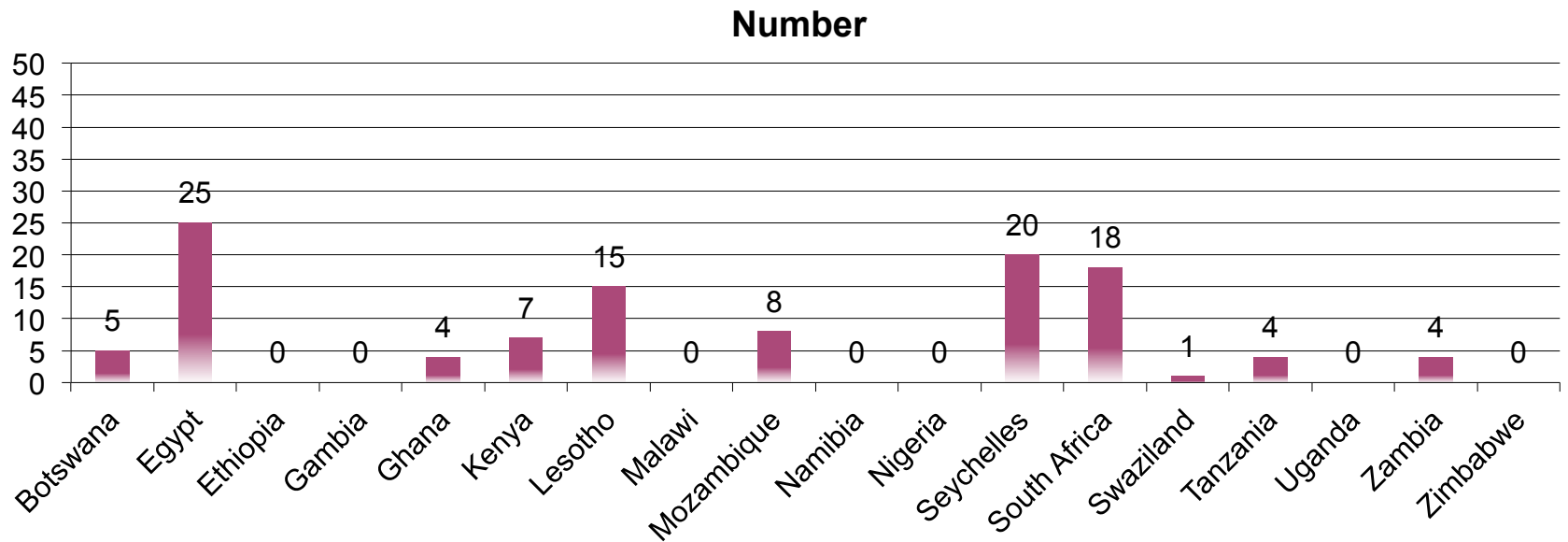


■ Live births by sex and urban/rural residence  
 ■ Live births by age of mother and sex of child



■ Infant deaths by sex and urban/rural residence  
 ■ Infant deaths by age and sex  
 ■ Infant deaths by month of death

# VS tables provided in the last five years



# A look at specific tables, last 5 years

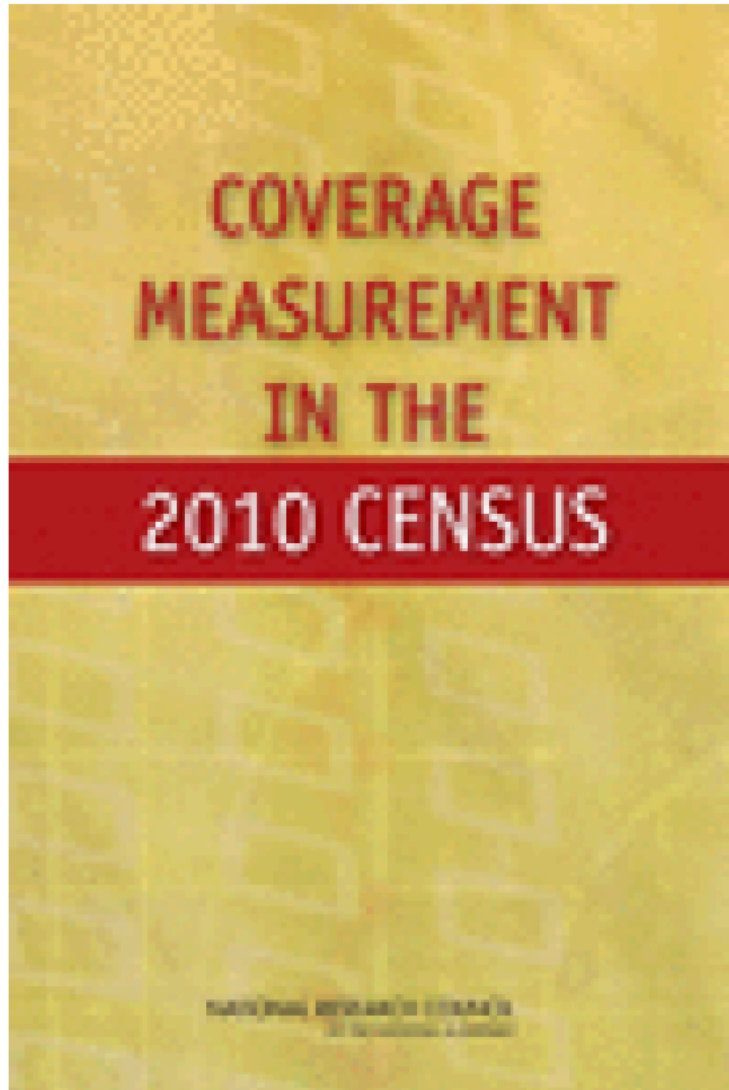
**Table E01 – Live births by sex and urban/rural residence**

	2010	2011	2012	2013	2014
Botswana					
Egypt	✓	✓	✓	✓	
Ethiopia					
Gambia					
Ghana	✓				
Kenya	✓	✓	✓	✓	.
Lesotho	✓	✓	✓		.
Malawi	.	.			.
Mozambique					
Namibia	.	.	.	.	
Nigeria					
Seychelles	✓	✓	✓	✓	
South Africa	✓	✓	✓	✓	✓
Swaziland					.
Tanzania					.
Uganda					.
Zambia	✓				.
Zimbabwe					.

# A look at specific tables, last 5 years

Table G01 – Deaths by sex and urban/rural residence					
	2010	2011	2012	2013	2014
Botswana					
Egypt	✓	✓	✓	✓	
Ethiopia					
Gambia					
Ghana	✓				
Kenya	✓	✓	✓	✓	.
Lesotho	✓	✓	✓		.
Malawi	.	.			.
Mozambique					
Namibia	.	.	.	.	
Nigeria					
Seychelles	✓	✓	✓	✓	
South Africa	✓	✓	✓	✓	✓
Swaziland					.
Tanzania	✓	✓	✓		.
Uganda					.
Zambia	✓				.
Zimbabwe					.

# Effective Feedback Loop b/w Civil Registration Processes & Vital Statistics Production



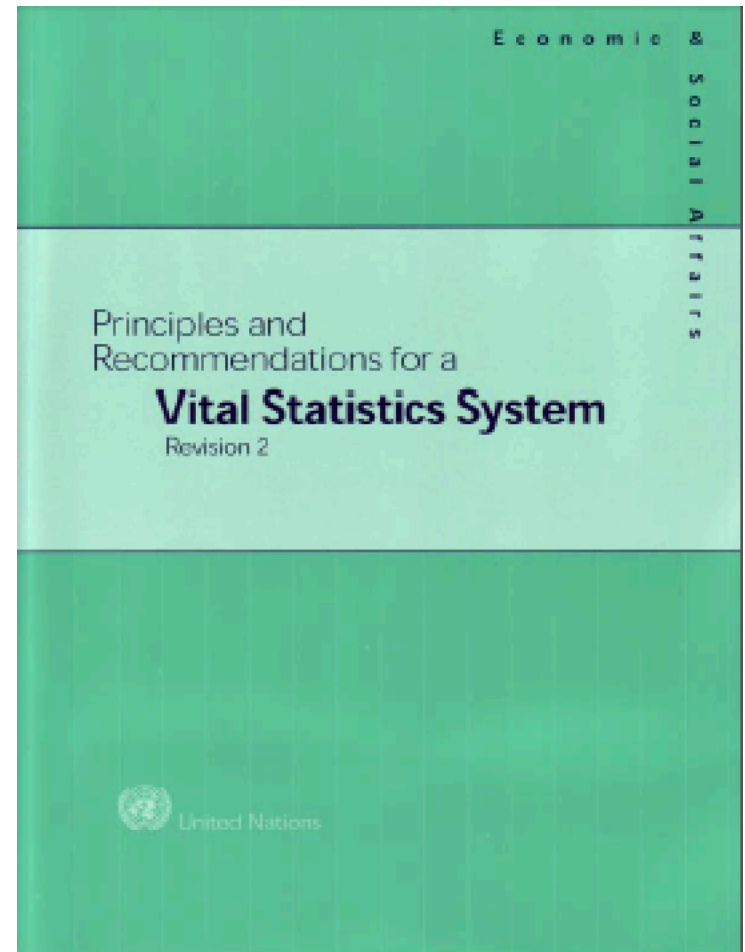
## More customized approaches to BR/DR Completeness M&E

In planning the 1990 and 2000 US censuses, the main objective was to produce alternative counts based on the measurement of net coverage error. For the US 2010 census coverage measurement program, the Census Bureau will deemphasize that goal, and is instead planning to focus on the second goal of improving census processes.

Source: Bell, Robert M. and Cohen, Michael L. *Coverage Measurement in the 2010 Census*. National Research Council, 2008

# Measurement of Death Registration Completeness

- Direct Assessment
- Indirect Assessment
  - Death Distribution Methods
    - Generalized Growth Balance Method
    - Synthetic Extinct Generations Method
  - Record Linkage Studies



# Basic framework

**Adequately funded evaluation activities are essential**

- For improving systems that have deficiencies
- For maintaining systems that function satisfactorily



**Quality assurance**



**Quality assessment**

# Basic framework

## Quality assurance

- Encompasses each stage of CRVS operations
- All vital events are registered without duplication
- All related information is recorded
- Information is compiled, validated and processed
- Vital statistics are released in timely manner

## Quality assessment

- Specific studies for specific questions
- Coverage of registration of vital events
- Accuracy of variables
- Overall functioning of sub-systems
- Can be ad hoc or regular exercises

# Standards of Vital Statistics Evaluation

Completeness

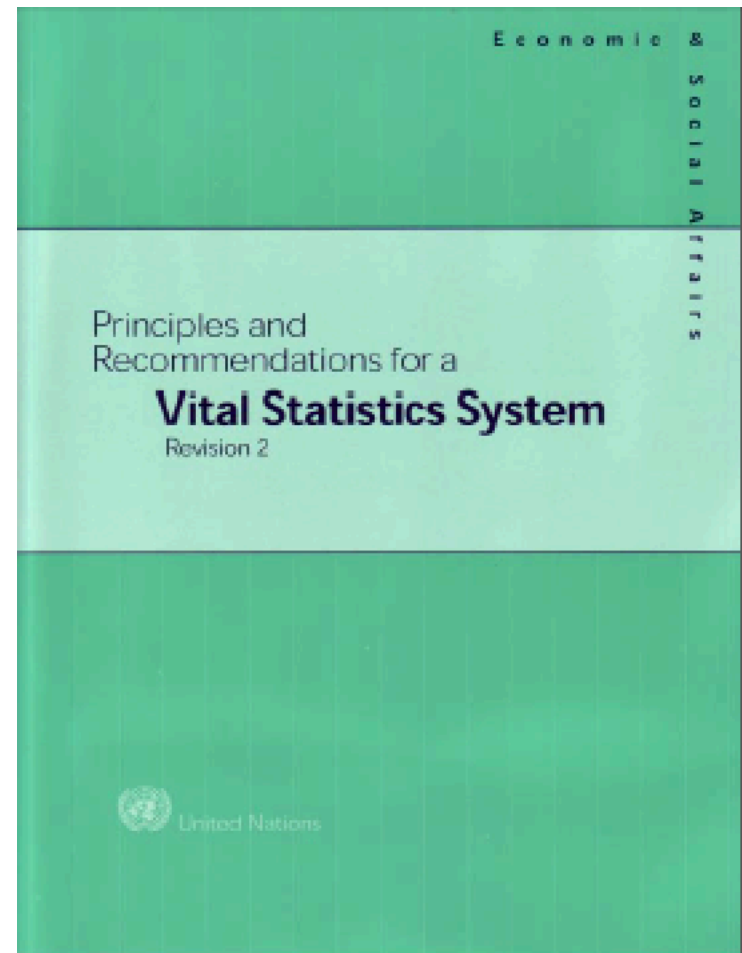
Correctness  
or Accuracy

Availability

Timeliness

# Registration Completeness and Quality: two inter-related evaluation dimensions

- Quality of Age Reporting:
  - Age heaping: Whipple Index, Meyers Index
  - Age exaggeration:
- Quality of Sex Reporting:
  - Sex ratio at birth
  - Sex-disaggregated mortality estimates
- Plausibility of demographic estimates from CR:
  - Comparison with
    - model-based estimates
    - survey-based estimates
    - census-based estimates



# Questions/Themes that call for further elaboration

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- Sustainability of continued CRVS Scale-up & Improvement

# A Concluding Comment

- These papers provide a rich and detailed mapping of recent efforts to strengthen and expand CRVS systems in selected sub Saharan African countries
- After decades of CRVS neglect and stagnation over the last 40 years, the evidence base and knowledge repository is ripe for broadening and deepening
- Important opening to develop a richer evidence base on both data quality assurance and data quality completeness/quality assessment, and the opportunity for well-designed feedback loops between these two evaluation approaches